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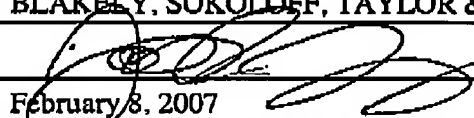
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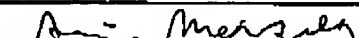
7 FEB 08 2007

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/673,699
		Filing Date	September 29, 2003
		First Named Inventor	Xiaodong Lin
		Art Unit	2181
		Examiner Name	Lai, Vincent
Total Number of Pages in This Submission	18	Attorney Docket Number	42P17577

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Return Receipt Postcard</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Joseph Lutz, Reg. No. 43,765 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	February 8, 2007

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Annie McNally		
Signature		Date	February 8, 2007

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ndc) 12/12/2008.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22319-1450

FEB 08 2007

FEE TRANSMITTAL for FY 2006 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>	
		Application Number	10/673,699
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	September 29, 2003
		First Named Inventor	Xiaodong Lin
TOTAL AMOUNT OF PAYMENT		Examiner Name	Lai, Vincent
(\$)		Art Unit	2181
0.00		Attorney Docket No.	42P17577

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakey, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
- under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fees from below	Fee Paid
30	30	0	\$0.00
Independent Claims	4	4	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 380	2203 180	Multiple Dependent claim, if not paid
1204 790	2204 395	**Reissue independent claims over original patent
1206 300	2206 150	**Reissue claims in excess of 20 and over original patent

**or number previously paid, if greater. For Reissues, see below

SUBTOTAL (1) (\$)

0.00


2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
2053 130	2053 130	Non-English specification
1251 120	2251 60	Extension for reply within first month
1252 460	2252 225	Extension for reply within second month
1253 1,020	2253 510	Extension for reply within third month
1254 1,590	2254 795	Extension for reply within fourth month
1255 2,160	2255 1,080	Extension for reply within fifth month
1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	2451 1,510	Petition to institute a public use proceeding
1460 130	2460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)
1808 180	1808 180	Submission of Information Disclosure Sheet
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Joseph Lutz	Registration No. (Attorney/Agent)	43,765
Signature		Telephone	(310) 207-3800
		Date	02/08/07

Based on PTO/SB-17 (12-04) as modified by Blakey, Sokoloff, Taylor & Zafman (Wt) 12/15/2004.
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**FEE TRANSMITTAL
for FY 2006**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**Complete If Known**

Application Number	10/673,699
Filing Date	September 29, 2003
First Named Inventor	Xiaodong Lin
Examiner Name	Lai, Vincent
Art Unit	2181
Attorney Docket No.	42P17577

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.**FEE CALCULATION****1. EXTRA CLAIM FEES**

			Extra Claims		Fee from below		Fee Paid
Total Claims	30	30*	0	x	50.00	=	\$0.00
Independent Claims	4	4*	0	x	200.00	=	\$0.00
Multiple Dependent						=	

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 350	2203 150	Multiple Dependent claim, if not paid
1204 750	2204 355	**Release independent claims over original patent
1205 300	2205 150	**Release claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

*or number previously paid, if greater. For Releases, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee Code	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 120	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,180	2255 1,090	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
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1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1480 130	2480 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
1809 750	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 750	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	


Other fee (specify)

SUBTOTAL (2)

(\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Joseph Lutz	Registration No. (Attorney/Agent)	43,765	Telephone	(310) 207-3800
Signature		Date	02/08/07		

Based on PTO/SB-17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/ 12/15/2004).
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